

DRAFT 1.0 11/6/12

Request for Proposal (RFP) for Navigator Lead Agency

Lead Agency Requirements

In addition to all other requirements specified herein, both Government and Non-Government agencies selected as Navigator Lead Agencies must:

- (1) Be knowledgeable about health care reform nationally (including but not limited to the Affordable Care Act [ACA] and in Washington State;
- (2) Have experience organizing and/or conducting effective outreach in the community;
- (3) Be knowledgeable about Medicaid programs and populations eligible for Medicaid;
- (4) Have experience leading projects and/or major efforts that involved collaborative problem solving with community partners; and
- (5) Avoid any conflict of interest with a health care carrier (insurer).

General/Administrative/Financial Information for Prospective Lead Agency

A. For Non-Governmental Organizations:

1. Provide legal name of entity, any DBAs, and full address of primary office and any satellite locations, and include the current number of employees housed in each location.
2. Describe how entity is organized (non-profit; corporation; subsidiary).
3. Provide name and title of all officers and top level managers. If any officer is employed by a health care entity, serves on its board of directors, has an immediate relative employed by such an entity, or is otherwise engaged, provide the name of organization and explain the nature of the relationship.
4. Provide 2011 operating budget for entity with high-level summary of revenues, expenditures and program expenditures (for example, previous year's annual report or other high-level summary of revenues and expenditures.)
5. Does entity have audited financials? If yes, provide copy of most recent audit report.
6. Provide the number of FT, PT and contract employees by job title (if job title is not descriptive, please provide short descriptor).
7. Provide an organization chart showing reporting relationships at department/unit level.
8. If organization intends to manage navigator network and provide navigator services to enrollees:
 - a. Describe nature and scope of services to be delivered by lead agency.

b. Describe the nature and scope of services to be delivered by Navigator organizations in the community, i.e., number of community organizations and percent of grant funding to be dispersed to these organizations.

9. Identify the county or counties the lead agency proposes to lead. If multi-county area is proposed, provide rationale for expanded area.

B. For Governmental Organizations:

1. Provide name of governmental unit and programs administered by the agency.

2. Is unit organized at the local, county, state or federal level?

3. Provide address (es) of all agency locations relevant to managing the navigator network.

10. Provide names and titles of (no more than) five individuals in the organization who would be most directly involved in managing the navigator network. If any officer is employed by a health care entity, serves on its board of directors, has an immediate relative employed by such an entity, or is otherwise engaged, provide the name of organization and explain the nature of the relationship.

4. Does organization intend to only manage navigator network or will organizational staff also provide navigator services to enrollees? If organization intends to provide navigator services, describe scope of such services and available resources to provide same.

5. If organization intends to manage navigator network and provide navigator services to enrollees:

a. Describe nature and scope of services to be delivered by lead agency.

b. Describe the nature and scope of services to be delivered by Navigator organizations in the community, i.e., number of community organizations and percent of grant funding to be dispersed to these organizations.

6. Provide name of county (or counties) that organization intends to lead. If multi-county area is proposed, provide rationale for expanded area.

Evaluation Criteria for Prospective Lead Agency (Section II applies to both governmental and non-governmental organizations)

1. Describe why the organization is well-suited for developing and managing the county's navigator network. Rationale should include relevant experience, current working relationships with prospective navigator-type entities, understanding of the needs of those individuals most likely requiring navigator assistance, and any other expertise that helps establish the organization's credentials for development and management of the county network.
 - a. Agency purpose/programs
 - b. Agency mission
 - c. Length of time in operation in this county
 - d. Proposed county/counties to be managed
 - e. Describe similar projects/efforts successfully managed in the past 3 years
 - f. Describe experience overseeing other navigator-like organizations in the past 3 years
 - g. Describe the agency's current leadership/management role with community-based service organizations in the county
 - h. Describe the agency's current relationship(s) with community-based organizations in the proposed service area that perform navigator-like activities
 - i. Describe current resources (i.e., staffing, experience) for providing training and technical assistance to navigator organizations.
 - j. Describe organization's resources and approach to delivering or coordinating services that meet:
 - i. The cultural and/or language needs of consumers
 - ii. Ensure access for people with disabilities
 - iii. Reach underserved/vulnerable populations
 - k. Describe current communication approach with community-based partners for disseminating information and announcing changes that impact community members.
 - l. Describe experience developing outreach plans in the past 3 years to meet target or at-risk populations.

Development of Navigator Network in Service Area

1. The Lead Agency will be expected to manage the navigator organization selection process and recommend to the Health Benefit Exchange the composition of the navigator network, including the specific organizations to be selected and the targeted coverage of each organization. (How do we want agencies to use the Navigator organization selection criteria)
2. Please outline a **selection process** that demonstrates your organization's intent to identify the organizations best suited to providing navigator services in your county/counties.
Important: the selection process must address the ACA requirement that each navigator entity (1) has demonstrated existing relationships, or the ability to establish relationships, with potential users of the Exchange and (2) does not pose any conflict of interest. While additional federal guidance on conflict of interest guidelines is pending, respondents should minimally assess whether any entity might present a conflict of interest (financial or otherwise) due to its relationship with a health care carrier/insurer and/or any providers of care.
NOTE: Lead Agency will provide profiles of proposed navigator entities; therefore response to question 2 should only address the selection process and should not include the navigator entities to be recommended.
3. Describe **how** Lead Agency proposes to oversee and manage navigator entities, including:
 - a. Routine communication of information/changes that impact Navigator services.
 - b. Oversight to assure Navigator organizations are achieving the goals of the program.
 - c. Measurement of Navigator service results and quality, including how well enrollments reflect outreach to targeted communities.
 - d. Assuring that Navigator representatives meet training requirements.
4. Outline any required or desirable technological needs from the Exchange.
5. Describe the agency's resolution process in a situation where a conflict of interest arose within a navigator organization or representative.
6. Describe the agency's resolution process if complaints or issues arose in which an error or omission by a Navigator representative had an adverse impact to a consumer.

Evaluation Criteria for Selection Navigator Organizations

1. For each prospective organization recommended for inclusion in the navigator network for Lead Agency's service area, provide a profile to demonstrate how the organization meets the preferred criteria and credentials the Exchange has developed working in concert with stakeholders across the state.
 - a. Name of organization
 - b. Target population
 - c. Mission statement/purpose
 - d. Organization is well-established in the community, has positive regard among community members and is trusted by community members.

- e. Describe organization's typical target population/membership - include most relevant members (i.e., uninsured, low income, Medicaid-eligible, adult +/- child, military, American Indian, Native Alaskans, disabled, linguistic and cultural needs, etc.).
 - f. Organization uses an approach that ensures cultural sensitivity and the effective delivery of services to individuals with language or disability-related barriers and to underserved/vulnerable populations.
 - g. Organization staff reflects the diversity of the population served.
 - h. Organization staff must have experience and skills using computer applications.
 - i. Organizational staff is available to meet with community members outside of the organization's office locations (i.e., community events, home or office site of member, etc.).
 - j. Organization has current staff with expertise in eligibility, enrollment and program specifications related to health care programs (public and/or private).
 - k. Provide staff profile for organization (number and type of positions)
 - l. Identify staff by job type with expertise in Medicaid and other health care/health insurance programs.
 - m. Organization's population served aligns with individuals likely to be eligible for Exchange plans or programs (see county-specific demographics provided with this request).
 - n. Organization has experience serving diverse, low income communities.
 - o. Organization already provides health insurance/health benefit counseling.
 - p. Organization currently determines a consumer's eligibility and/or completes enrollment for public health services or benefits.
 - q. Organization has an existing Information and Referral component that connects consumers to health care programs and services.
 - r. Organization has methods in place to communicate information widely to inform community members. Describe.
 - s. Organization conducts public education events or activities related to health care, health literacy, health care services or programs and/or health insurance plans.
 - t. Organization has experience communicating complex programs in terms and languages that are understandable for target populations. (Note: specify languages that can be supported)
 - u. Organization has the capacity to provide consumers with post-enrollment follow-up/support after the initial eligibility and enrollment
 - v. Organization can offer services at hours outside standard business hours (Monday-Friday 8 a.m. to 5 p.m.).
 - w. Organization can provide flexible staffing to meet peak enrollment periods (i.e., Oct-Feb expected to be heaviest outreach and assistance months).
2. Does organization require any technological support and/or other assistance to fulfill navigator role?
7. Lead Agency will provide classroom style training as directed by the Exchange (such training will be facilitated by a "train the trainer" approach and would require that the organization have both the staff and office space to provide the training to both the initial staff to be trained as well as new hires requiring training and certification throughout the year).

8. Navigators must participate in a required training program; pass an exam; agree to participate in continuing education as needed; and submit an application attesting to character and financial integrity in order to become certified. Lead Agency will coordinate, track and oversee certification process on behalf of the Exchange.